## FORM D

#### UNITED STATES

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

BECEIVED C

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Expires: April 30, 2008
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OMB Number:

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16.00

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)											
Evolution Investments LLC											
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506	Section 4(6) ULOE										
Type of Filing: New Filing Amendment	PHOCESSE										
A. BASIC IDENTIFICATION DATA	Alle										
Enter the information requested about the issuer	AUG 1 1 ZIUS										
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	THOMSON										
Evolution Investments LLC FINANCIAL											
Address of Executive Offices (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)											
29325 Chagrin Blvd. #105, Pepper Pike, OH 44122	216/593-0402										
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)										
Brief Description of Business											
Investment Fund											
Type of Business Organization											
corporation   limited partnership, already formed	other (please specify):										
business trust limited partnership, to be formed	limited liab. company										
and the second s	- Company										
Month	Year										
Actual or Estimated Date of Incorporation or Organization:	0 5 Actual Estimated										
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#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02) 1 of 8

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer ☐ Director General and Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Evolution Capital Partners LLC Business or Residence Address (Number and Street, City, State, Zip Code) 29325 Chagrin Blvd., Suite 105, Pepper Pike, OH 44122 Check Box(es) that Apply: Promoter Director General Partner or Managing Member Full Name (Last name first, if individual) Brendan D. Anderson Business or Residence Address (Number and Street, City, State, Zip Code) 29325 Chagrin Blvd., Suite 105, Pepper Pike, OH 44122 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Paul L. Gierosky Business or Residence Address (Number and Street, City, State, Zip Code) 29325 Chagrin Blvd., Suite 105, Pepper Pike, OH 44122 Check Box(es) that Apply: Promoter ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Jeffrey D. Kadlic Business or Residence Address (Number and Street, City, State, Zip Code) 29325 Chagrin Blvd., Suite 105, Pepper Pike, OH 44122 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

							B. IN	IFORM	MATIC	N ABO	O TUC	FFER	ING			
1.	Has the is	ssuer	· sold o										ng?		Yes	No
2.	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?  Does the offering permit joint ownership of a single unit?  Enter the information requested for each person who has been or will be paid or given, directly indirectly, any commission or similar remuneration for solicitation of purchasers in connection vales of securities in the offering. If a person to be listed is an associated person or agent of a now sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer, more than five (5) persons to be listed are associated persons of such a broker or dealer, you may forth the information for that broker or dealer only. None  ull Name (Last name first, if individual)  usiness or Residence Address (Number and Street, City, State, Zip Code)  tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers  Check "All States" or check individual States)  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  ull Name (Last name first, if individual)  usiness or Residence Address (Number and Street, City, State, Zip Code)  ame of Associated Broker or Dealer  tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers  Check "All States" or check individual States)  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]													<u>\$ 500,</u>	000 (subj. to	Company discretion)
3.	Does the	offer	ring per	mit join	it owner	ship of a	a single	unit?							Yes ⊠	No
	indirectly sales of s dealer re- more tha	, any ecuri gister n fiv	y comn ities in r red with e (5) po	nission the offe h the Sl ersons t	or simil ring. If EC and/ o be list	ar remu a person or with ted are a	ineration to be l a state associate	n for so isted is or state ed perso	licitation an assoc s, list th	n of pur ciated pe e name	rchasers erson or of the	in com agent of broker of	nection with f a broker or or dealer. If			
Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?																
Bus	iness or l	Resid	dence A	Addres	s (Num	ber and	l Street	, City,	State, Z	ip Cod	e) <sub>.</sub>					
Nan	ne of Ass	socia	ited Br	oker or	Dealer	•										
									All States							
-	-						-									i
-											• •					
		-														
Full	Name (I	Last	name i	first, if	individ	ual)										
Bus	iness or l	Resid	dence	Addres	s (Num	ber and	l Street	, City,	State, Z	ip Cod	e)					
Nan	ne of Ass	ocia	ted Br	oker or	Dealer	•					·					
											ers				All States	
[A	L] [A	K]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[ ]	_] [1	N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
		-	•				-									
							[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full	Name (I	Last	name i	irst, if	ındivid ———	ual)										
Busi	iness or l	Resid	dence A	Addres	s (Num _	ber and	Street	, City, S	State, Z	ip Cod	e)					
Nan	ne of Ass	socia	ted Br	oker or	Dealer	•										
										urchas	ers				All States	· · · · · ·
[A	L] [A	ιK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H1]	[ID]			
[11	L] [I	N]	[ A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
				[NH]				[NC]			[OK]					
[R	.11 fS	[O	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box $\square$ and indicate in the column below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security				
			Aggregate Offering Price	An	nount Already Sold
	Debt	\$	0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	\$	0	\$	0
	Other (specify)limited liability company interests	\$	75,000,000	\$ <u>_1</u> 3	3,555,941.48
	Total	\$	75,000,000	\$ <u>13</u>	3,555,941.48
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	Do	Aggregate ollar Amount of Purchases
	Accredited Investors		37	<b>\$</b> 13	3,555,941,48
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering				
	Type of offering		Tuna of	D	ollar Amount
			Type of Security	Di	Sold
	Rule 505		N/A	\$	0
	Regulation A		N/A	\$	0
	Rule 504	-	N/A	\$	0
	Total		N/A	\$	0
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees			\$	
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (Specify finder's fees separately)			\$	
	Other Expenses (identify) Organizational Fees			\$	250,000
	Total			\$	250,000

4 of 8

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EX	PENSES AN	D USE OF	PROCEED	S			
	b. Enter the difference between the aggregate o 1 and total expenses furnished in response to Pargross proceeds to the issuer."	rt C-Question 4.a. This difference is	the "adjusted		\$ <u>74,750,</u>	.000	_		
5.	Indicate below the amount of the adjusted gross for each of the purposes shown. If the amount and check the box to the left of the estimate. adjusted gross proceeds to the issuer set forth in the state of the insuer set forth in the state of the s	for any purpose is not known, furnish The total of the payments listed n	sh an estimate nust equal the						
				Or Dire	ments to fficers, ectors, & ffiliates	P	ayments To Others		
	Salaries and fees		🗆	\$	0	\$	0		
	Purchase of real estate		🔲	\$	0 🗆	\$	0		
	Purchase, rental or leasing and installation of	machinery and equipment	🗆	\$	0	\$	0		
	Construction or leasing of plant buildings and	d facilities	🗆	\$	0 🗆	\$	0		
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	e assets or securities of another issuer		\$	0	\$	0		
	Repayment of indebtedness		🗆	\$	0 🗆	\$	0		
	Working capital (to be called as needed)	🔲	\$	0	\$	0			
	Other (specify) Purchase of preferred equity	y securities and other equity							
	related securities		_	\$	) <u> </u>	\$7	74,750,000		
	Column Totals  Total Payments Listed (column totals added)			\$	<b>_</b>	\$ <u> </u>	74,750,000 00		
		D. FEDERAL SIGNATU	U <b>RE</b>						
sig	e issuer has duly caused this notice to be signed nature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accre-	to furnish to the U.S. Securities and	d Exchange Co	mmission, u					
SS	uer (Print or Type)	Signature		Date (					
Ξv	olution Investments LLC	Miss Richard		7	32104				
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)							
3r	endan D. Anderson	mers LLC, Man	ers LLC, Managing Member						
				_			·		
		ATTENTION							
_	Intentional misstatements or on	ingians of fact constitute fodors	al oriminal vic	vlatione /S	00 19 11 5 0	1001	\		

		E. STATE SIGNATURE								
1.	Is any party described in 17 CFR 230.262 prese	Yes	No							
		See Appendix, Column 5, for state response.								
2.	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by law.									
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	e issuer has read this notification and knows the lersigned duly authorized persons.	e contents to be true and has duly caused this notice to be signed on its be	half by t	ne						
Issu	ner (Print or Type)	Signature Date								
Evolution Investments LLC 7/31/06										
Naı	me of Signer (Print or Type)	Title of Signer (Print or Type)								
Bre	rendan D. Anderson Manager of Evolution Capital Partners LLC, Managing Member									

### ${\it Instruction:}$

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1	2	2	3		4			;	5.
	Intend to non-acconinvest State (Part	credited ors in	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Limited Liability Interests*	Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X	*600,000	2	600,000				X
СО									
CT									
DE									
DC									
FL		X	*850,000	4	850,000			,	X
GA									
HI									
ID									
IL		X	*800,000	3	800,000				X
IN									
IA					:				
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN		X	*676,441.48	1	676,441.48				X
MS									
МО									
MT									
NE						,			
NV									

7 of 8

# APPENDIX

-1	2		3		4						
	Intend to non-acc investo State (Part	redited ors in	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Limited Liability Interests*	Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No		
NH											
NJ							_				
NM											
NY											
NC					•						
ND											
ОН		Х	*10,629,500	27	10,629,500	-			X		
ок											
OR											
PA											
RI											
SC											
SD											
TN											
TX											
UT											
VT											
VA											
WA											
WV											
WI						ļ					
WY							_				
PR											

8 of 8

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